

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

REQUEST FOR PROPOSALS

PROGRAM NAME: Maryland Readmission Reduction Pilot Program (COVID-19 Relief Grant)

*****Providers in Allegany, Frederick, St. Mary's, Washington, and Wicomico Counties are eligible to apply. All provider applications for funding must be sent to the Washington County Mental Health Authority (Core Service Agency) for review, with final approval by BHA using selection criteria and scoring defined in this RFP.*****

ANNOUNCEMENT DATE: September 22, 2021

PRE-BID CONFERENCE DATE: October 7, 2021 at 10:00 am

DEADLINE FOR SUBMISSION OF PROPOSALS: October 18, 2021

*****Due to the Washington County Mental Health Authority-Core Service Agency*****

I. PROJECT PURPOSE AND OVERVIEW

The Maryland Department of Health (MDH), Behavioral Health Administration (BHA) was recently awarded \$16,100,385 from the Substance Abuse and Mental Health Administration (SAMHSA), Mental Health Block Grant (MHBG) COVID-19 Relief Funding. Mental health block grant funds were requested to develop a readmission reduction pilot program that deploys teams of case managers to deliver 24/7 care coordination and psychosocial support to individuals who have a serious mental illness, including individuals with medical challenges and co-occurring mental health and substance use disorders (SUD). The team will work with the psychiatric units located within the jurisdictions' Emergency Departments (EDs) to identify individuals (adults and older adults) who are high utilizers of EDs or have had one hospital visit 6 months prior to admission to the program. The team will work with the individual, their family, and community providers to find appropriate services and work with the hospitals to develop discharge plans based on their assessments and treatment plan. The team will provide case management support 30-60 days post discharge, care coordination, education, skills training, and help address social determinants of health.

The COVID-19 pandemic has exposed and exacerbated severe and pervasive health and social inequities in America, including the critical importance of supporting people with mental illness and substance use disorders. As the pandemic swept through the states, societal stress and distress over this newly emerging disaster created the need for nimble and evolving policy and planning in addressing mental and substance use disorder services. SAMHSA, through this guidance, is asking states to improve and enhance the mental health and substance use service array that serves the community.

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

REQUEST FOR PROPOSALS

II. JURISDICTIONAL SELECTION PROCESS

The jurisdictions selected for funding were based on rates of Emergency Department (ED) visits for psychiatric related crises or interventions, the lack of a robust crisis response system, challenges due to geographic location, and limited community behavioral health services. The targeted jurisdictions with the highest rate of ED visits, per 1,000 individuals are:

- Allegany County - 27 per 1,000
- Frederick County - 21.4 per 1,000
- St. Mary's County - 22.1 per 1,000
- Washington County - 22.6 per 1,000
- Wicomico County - 22.5 per 1,000

The vendor selected to implement this project will collaborate with local hospital emergency departments, inpatient psychiatric departments, community behavioral health providers, and the local Systems Managers (LBHA/LAA/CSA) to coordinate care for individuals.

Grantees must align funded projects with BHAs goals, which are to:

BHA Goal #2: Develop and expand a high quality, integrated, person-centered and recovery-oriented system of care to address mental health, substance use disorders (SUD), and co-occurring mental health and SUD across the lifespan; and

BHA Goal #3: Improve and expand data collection, analysis, and dissemination to inform and evaluate planning, decision-making, policies, and programs.

The Maryland Readmission Reduction Pilot Programs aims to:

MD-RRPP Goal #1: Target, reduce, and prevent psychiatric admissions to hospital EDs for individuals identified as at risk for high hospital ED utilization;

MD-RRPP Goal #2: Use technology to expand and enhance access to 24/7 care coordination and psychosocial supports; and

MD-RRPP Goal #3: Provide education and access to resources for individuals and their families.

III. REQUIRED PROPOSAL ELEMENTS

Each proposal must contain all of the following elements in the order listed:

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

REQUEST FOR PROPOSALS

- Name, address and telephone number of contact
- List the county/counties in which proposed services will be rendered;
- Description of contracting entity and relevant experience;
- Detailed description of services to be offered;
- Proposed staffing
 - position title
 - full time equivalency for each position
 - position summary
 - minimum qualifications
- Description of how project fits into bidder's organization;
- Description of referral, admission, and discharge processes;
- Description of community linkages including relevant shared service agreements;
- Detail performance measurement and monitoring plan for project (See Section VII for Data Collection and Reporting Requirements); and
- Schedule for project implementation that assures continuity of care

Additionally, a budget for the project will be submitted on MDH (DHMH) budget Form 432

IV. SUBMISSION INSTRUCTIONS

Proposals shall be submitted in two parts; a technical proposal and a cost proposal. Please submit an electronic document of the proposal to: **carriet@wcmha.org**. WCMHA is not responsible for late, lost, or misdirected email. Proposals not received by the deadline will not be considered. WCMHA reserves the right to request clarification of information submitted and to request additional information from one or more providers.

ATTN: Carrie Tressler
Washington County Mental Health Authority, Inc.
329 East Antietam Street, Suite 5
Hagerstown, Maryland 21740
Telephone: 301-739-2490, ext. 117
Fax: 301-739-2250

*****Proposals must be received by 4:00 p.m. on October 18, 2021. Proposals received after this deadline shall not be considered. *****

V. PROPOSAL SUBMISSION

Format of the Proposal

Each offeror is required to submit a proposal by email bearing the title “***Maryland Readmission Reduction Pilot Program***” and include the proposal as an attachment. The proposal must address all elements of the request for proposal. The organization’s contact person and that person’s contact information should be identified in the body of the email text in the event that questions

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

REQUEST FOR PROPOSALS

may arise. The attachment will be the final response for the offeror's proposal. An acknowledgment of receipt of the emailed proposal will be sent to the offeror.

VI. PRE-BID CONFERENCE

There will be a virtual Pre-Bid Conference (PBC) for interested potential bidders. The PBC will be on **October 7, 2021 at 10:00 am**. While attendance is not mandatory it is strongly advised that interested bidders attend. The purpose of the conference is to address questions concerning the expectations of the project. All interested parties should register with WCMHA at carriet@wcmha.org no later than 4:00 pm on October 4, 2021 to receive a video meeting invitation. After October 8, 2021, a recording of the PBC will be available upon request.

VII. CONTRACT PERIOD

The contract entered into pursuant to this RFP shall begin on or about **11/15/2021** through **03/15/2023**. A pre-award risk assessment must be conducted prior to award, upon execution of a contract, and annually.

VIII. SPECIFIC PROGRAM REQUIREMENTS

Regulatory

Bidders shall be approved by the Maryland Department of Health MDH as either an Outpatient Mental Health Clinic (COMAR 10.21.20), a Mobile Treatment Program (COMAR 10.21.19), a Targeted Case Management Program (COMAR 10.09.45), or a Mobile Crisis Service provider approved to render readmission reduction services in the state. In either case, programs will need to be in compliance with regulations, accreditation standards, and local and state guidelines.

Services to Be Offered

1. Assessment
2. Care/Service Coordination
3. Case Management
4. Peer Recovery Support Services
5. Health education, development, and dissemination of educational materials
6. Training (staff)

Eligible activities may involve the following areas:

- Case Management
- Technology to assist with Care Coordination and compliance with treatment
- Health Education, development, and dissemination of educational materials related to mental health management, appropriate aftercare, coping mechanisms,

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

REQUEST FOR PROPOSALS

- preventative measures, and evidence-based practices;
- Training of staff and volunteers using evidence-based approaches;
- Staff (salaries, fringe, etc.);
- Linkages to behavioral health treatment and recovery supports; and
- Start-up cost, i.e. recruitment and onboarding of staff, leasing, space, equipment, and supplies.

Target Population

Services of this program will be provided to consumers who:

- Have a mental illness and/or co-occurring disorders;
- Are at high risk of readmission based upon a risk assessment (to be selected), and 3 or more ED visits within a 6 month period or one inpatient psychiatric hospitalization;
- Resides in one of the 5 identified jurisdictions.

Location

Services will be provided in the five jurisdictions that are targeted for this project.

Program Integration

The Contractor must agree to participate with the Core Service Agency or Local Behavioral Health Authorities in Allegany, Frederick, St. Mary's, Washington, and Wicomico Counties on an ongoing basis, in the areas of: systems planning, quality assurance, client movement through the system, accountability, and system wide meetings. This is intended to help integrate the provider's services into a county-wide continuum of mental health care during the award period and according to the plan of sustainability when grant award funding ends.

The Contractor must develop and maintain formal written service coordination agreements with other relevant participant agencies in the mental health system.

IX. STAFFING REQUIREMENTS

Staffing requirements are for a full-time Project Coordinator/Supervisor Position at 1.0 FTE hours of on-site service per week. Bidder shall list all staff positions associated with the project by:

- Title
- Job description and function
- Full Time Equivalency (FTE)

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

REQUEST FOR PROPOSALS

Position Title and Description

Sample Position Title:

Project Coordinator/Supervisor duties shall include, but not be limited to the following:

- Support, closely coordinate, and facilitate patient engagement and follow-up with patients' mental health and somatic care provider, and other treating mental health professionals;
- Facilitate development, in consultation with the patient, an individualized recovery plan and any changes in consultation with the patients treatment team, monitor patient progress, adjusting Individualized Recovery Plan (IRP) as necessary;
- Facilitate referrals for clinically indicated services (e.g., social services such as housing assistance, vocational rehabilitation, mental health specialty care, substance abuse treatment);
- Assess patients' treatment and recovery support needs, develop relapse prevention plans and facilitate referrals based on the individuals choice and appropriateness;
- Monitor and track clients (in person or by telephone) for changes in clinical symptoms and treatment side effects or complications;
- Develop crisis plan and assist patients in developing coping strategies;

The successful bidder should review the possibility of hiring current staff members, if they apply, as a way to ensure continuity of care. Proposed staff shall be appropriately credentialed pursuant to COMAR 10.21.17.11 and either 10.21.19.08 or 10.21.20.08, and 10.09.45.05 for Targeted Case Management. State Care Coordinators and Peer Recovery Specialists may also be considered for this position.

X. SPECIFIC CONDITIONS, OUTCOME, AND PERFORMANCE EXPECTATIONS

Data Collection and Reporting Expectations

The Contractor shall adhere to all reporting requirements of the SAMHSA, BHA, BHAs Office of Applied Research and Evaluation (ARE), and all other parties that may have legal, fiscal, or monitoring responsibilities for the program and services encompassed by this contract.

The Contractor must submit monthly progress reporting data elements that shall include, but not be limited to:

- Number of unduplicated individuals enrolled in program
- Number of new individuals enrolled in program during reporting period
- Number of individuals screened, assessed, and determined eligible during reporting period
- Number of individuals screened, assessed, and determined ineligible for program during reporting period
- Number of referrals to program by referral type
- Number of referrals with successful engagement to ancillary services

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

REQUEST FOR PROPOSALS

- Number and type of services provided while enrolled in program
- Number of discharges and reason for discharge during reporting period
- Number and type of referrals made at discharge during reporting period
- Number individuals hospitalized for behavioral health reasons while enrolled in program
- Number of program recipients who have one or more behavioral health related emergency department (ED) visits
- Demographic information on individuals enrolled (number of individuals served broken down by gender, race, age group, homeless status, and veteran status)

A final monthly program data reporting template and submission requirements will be provided to successful bidders upon program start-up.

XI. COST PROPOSAL AND FISCAL MANAGEMENT

Cost Proposal

Bidders shall submit a price proposal that delineates the costs of the project by line item. Costs that are not anticipated to be reimbursed by an alternative payer (i.e, the ASO) will form the substance of the price proposal.

Method of Payment

Payments will be issued when an approved invoice for actual expenditures based upon the number of individuals served and quarterly or monthly progress performance reports have been received. Funding will be targeted to Allegany, Frederick, St. Mary's, Washington, and Wicomico Counties. Funding breakdown is as follows:

- A total of **\$149,400** will be awarded annually to a vendor in Allegany and St. Mary's Counties to serve **30** individuals per month at a rate of **\$415** per month.
- A total of **\$199,200** in funding will be awarded to a vendor in Frederick and Washington Counties to serve **40** individuals per month at a rate of **\$415** per month.
- A total of **\$174,300** will be awarded to a vendor in Wicomico County to serve **35** individuals annually at a rate of **\$415** per month.
- Additionally, **\$75,000** will be awarded to a vendor in each jurisdiction for start-up cost. Eligible start-up costs may include leasing space, supplies, equipment, staff training, advertising and marketing materials, and recruitment and on-boarding of staff.

Funding is available for two years from the start of the SAMHSA grant date (03/14/2021 - 03/15/2023).

XII. METHOD OF AWARD

The Selection Committee shall first review all technical proposals for compliance with the requirements expressed in this RFP, which target jurisdictions with the highest rates of

**WASHINGTON COUNTY
MENTAL HEALTH AUTHORITY**

REQUEST FOR PROPOSALS

Emergency Department visits for psychiatric related crises or interventions, rural jurisdictions that lack a robust crisis response system and face challenges due to geographic location, and jurisdictions with limited community behavioral health services. Proposals will be studied in depth and evaluated, first for technical content without consideration for cost. Acceptable technical proposals will then be rated for both technical merit and cost. Technical considerations will receive 80% relative weight in the evaluation process and cost will receive 20% relative weight. The Selection committee will present its findings to the full Board of Directors for final determination.

Evaluation Method

1. Acceptable Offers

A technical evaluation will be completed by each member of the Selection Committee. All bidders who receive a rating of 70% or more of total points possible from a majority of committee members will be considered to have an acceptable offer, and will receive consideration of their price proposal. Technical factors will be weighted as follows:

Project Item to be Scored	Possible Points
Understanding of the program objectives	15
Approach, financial feasibility, methodology, and work plan including a plan toward collection and submission of data to BHA	45
Experience and qualification of the organization	25
Experience and qualification of the program personnel	15
TOTAL POSSIBLE POINTS	100

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**WASHINGTON COUNTY
MENTAL HEALTH AUTHORITY**

REQUEST FOR PROPOSALS

2. Unacceptable Offers

Those technical proposals receiving a technical rating below 70% from a majority of the committee members will be considered unacceptable. These proposals will not be considered further.

XIII. NOTIFICATION OF CONTRACT AWARD

The successful bidder will be notified in writing by the Local Behavioral Health Authority (LBHA) of its intent to award the contract by **November 1, 2021**. It is the intent of the LBHA to award this contract prior to the inception of the Fiscal Year when possible.

XIV. OTHER CONDITIONS OF AWARD AND TERMS

- A. The review panel reserves the right to reject any or all proposals or to award the contract to the next recommended bidder if the successful bidder does not execute a contract by **November 10, 2021**.
- B. The WCMHA and partnering LBHAs reserve the right to terminate the RFP process at any time, to modify the scope of this RFP at any time, and to modify any resulting contract if the Public Behavioral Health System (PBHS) evolves in such a way as to make such actions necessary.
- C. Each independent jurisdictional authority reserves the right to negotiate the budget submitted by the successful bidder.
- D. Unsuccessful bidders have the right to appeal the contract award decision and must follow the grievance policy of the jurisdiction to which they are submitting a proposal.

SAMHSA grant funds may not be used to purchase, prescribe, or provide marijuana or treatment using marijuana. See, e.g., 45 C.F.R. 75.300(a) (requiring HHS to ensure that Federal funding is expended in full accordance with U.S. statutory and public policy requirements); 21 U.S.C. 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana).